

LIVESTOCK SHOW PREMIUM APPLICATION

Association Name: _____

Association Address: _____

Street Address

City

State

Zip

Circle Association Non Profit Status: 501(c)3 / 501(c)5 If neither, please specify: _____

Contact Name: _____ Contact Phone: _____

Contact Address: _____

Street Address

City

State

Zip

Name of Show: _____

Date(s) of Show: _____

Location of Show: _____

Circle Show Type: All Breed / Single Breed If single, please specify breed: _____

Circle Exhibitor Type: Open Show / Youth Show If youth, please specify age range: _____

Actual Number of Livestock Animal Exhibitors: FY 2004: _____ FY 2005: _____

Actual Number of Entries: FY 2004: _____ FY 2005: _____

Total Cash Premiums/Awards Paid: FY 2004: _____ FY 2005: _____

Projected Cash Premiums to be Paid FY 2006 (Oct. 1, 2005 through Sept. 30, 2006): _____

Return with this application:

- Copy of Association By-Laws
- List of Association Officers (names & addresses)
- Complete Listing of Classes Offered at Show
- Complete Listing of Premiums/Awards Offered
- Completed W-9

Other application requirements:

- Application due before January 15, 2006
- Final reports due 60 days after the final day of show

I attest the above information is correct, I understand and will fulfill the requirements of this premium application, the above state association has statewide membership, and the above stated show is the largest show of the above stated association.

Signature of Secretary

Date

Signature of President

Date

Return to: Cinda Karlik

Michigan Department of Agriculture
P.O. Box 30017
Lansing, MI 48909
(517) 373-9760